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## APPLICANTS

Ming Lu, Taipei City, TAIWAN;

Bin-Chang Chang, Hsin-Chu, TAIWAN;  
Li-Wei Kung, Jhonghe City, TAIWAN;

## \*\* CONTINUING DATA \*\*\*\*\*

*NONE* *DR*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None* *DR*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/22/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature <i>DR</i> Initials	TAIWAN	4	20	3

## ADDRESS

TUNG & ASSOCIATES  
 Suite 120  
 838 W. Long Lake Road  
 Bloomfield Hills, MI  
 48302

## TITLE

Multi-step phase shift mask and methods for fabrication thereof

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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